

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BB</i>	<i>70385</i>	
O.I.P.E. CLASSIFIER		<i>8</i>	<i>5-2-00</i>
FORMALITY REVIEW	<i>CC</i>	<i>823</i>	
RESPONSE FORMALITY REVIEW			<i>6/23/00</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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